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7590

10/10/2006

South Winton Court
 Suite 204
 3136 Winton Road South
 Rochester, NY 14623

Repln. Ref: 01/17/2007 SFELEKE2 0011182300
 DAH:501101 Name/Number:10698294
 FC: 9204 \$1006.00 CR

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Tammy S. Moynihan

(Depositor's name)

Tammy S. Moynihan

(Signature)

January 9, 2007

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/698,294	10/31/2003	James M. Zavislan	ML-0434DIV	1407

TITLE OF INVENTION: CELLULAR SURGERY UTILIZING CONFOCAL MICROSCOPY

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$0	\$1000	01/10/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
SMITH, RUTH S	3737	600-476000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 KENNETH J. LUKACHER

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

LUCID, INC.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

ROCHESTER, NEW YORK

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

☒ Issue Fee☒ Publication Fee (No small entity discount permitted)☒ Advance Order - # of Copies 2

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☒ A check is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment to Deposit Account Number _____ (enclose an extra copy of this form).

5. Change in Entry Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

*Kenneth J. Lukacher*Date 01/09/2007

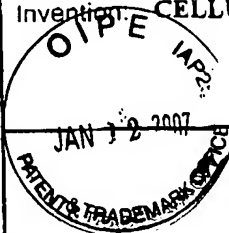
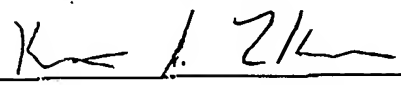
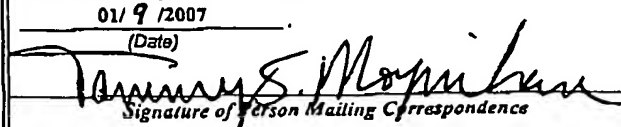
Typed or printed name

Kenneth J. Lukacher

Registration No. 38,539

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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TRANSMITTAL OF PAYMENT OF ISSUE FEE (Small Entity) (37 C.F.R. 1.311)					Docket No. ML-0434DIV	
Applicant(s): James M. Zavislan et al.						
Application No. 10/698,294	Filing Date 10/31/2003	Examiner Ruth S. Smith	Customer No. 024,902	Group Art Unit 3737	Confirmation No. 1407	
Invention: CELLULAR SURGERY UTILIZING CONFOCAL MICROSCOPY						
 <p style="margin: 0;">Mail Stop Issue Fee COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, VA 22313-1450</p>						
Transmitted herewith are the following for the above-identified application.						
<input checked="" type="checkbox"/> Issue Fee Transmittal Form PTOL-85 <input checked="" type="checkbox"/> Utility Fee: <u>\$ 700.00</u> <input type="checkbox"/> Design Fee: _____ <input type="checkbox"/> Plant Fee: _____ <input checked="" type="checkbox"/> Publication Fee: <u>\$ 300.00</u> <input checked="" type="checkbox"/> A check in the amount of <u>\$1,006.00</u> is attached. (Issue Fee, Pub. Fee, 2 copies) <input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>50-1101</u> as described below. <input type="checkbox"/> Charge the amount of <input checked="" type="checkbox"/> Credit any overpayment. <input checked="" type="checkbox"/> Charge any additional fee required. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.						
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
 _____ Signature			Dated: <u>January 9, 2007</u>			
Kenneth J. LuKacher Attorney for Applicants Registration No. 38,539 South Winton Court 3136 Winton Road South, Suite 301 Rochester, New York 14623 Telephone: 585-424-2670 Facsimile: 585-424-6196 KJL/tsm cc:						
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